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ABSTRACT

This paper presents the results of a 3 year study on violence between students at the University of Maryland. The study was designed to: (1) describe the prevalence of fighting between students; (2) analyze, by gender, students' description of their most recent physical fight with another for proximal influences on these altercations; (3) analyze proximal and distal influences on severity of injuries which occurred in the fights; and (4) make recommendations for improvement to campus policy toward reducing campus violence. Surveys were completed by 385 undergraduates (200 males; 185 females). The results showed that 32.7% of males and 17.3% of females had at least one physical fight in the previous six months. While males fought at bars and on campus, females fought in the privacy of their own homes. Physical fighting on campus is far from rare, and 9% of students suffered injuries requiring medical attention. Alcohol consumption was present in 40% of the violent episodes. Based on individual proximal risk factors, by gender as well as distal risk factors, it should be possible to construct a list of risks for violence and then set recommendations for risk reduction. One suggestion is that males stepping away from a confrontation with a stranger in front of friends would likely lower the risk of harm. Students should be educated to know the risks and risk prevention strategies. Policies should be constructed so that punishments are clear and consequences are known, instead of allowing for acceptance of fighting or excusing individuals because they were intoxicated. (Contains 11 figures, 1 table, and 15 references.) (JDM)



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Interpersonal Violence Between College Students:

Proximal Influences

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R. MARCUS

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Introduction

Today I, and my colleague Dr. Tom Reio, will describe the results of a 3 year study of violence between college students at the University of Maryland at College Park.

The goals of both studies were the following: 1) to describe the prevalence of fighting between students; 2) to analyze, by gender, students' descriptions of their most recent physical fight with another for proximal influences on those altercations; 3) to analyze the proximal and distal influences on the "severity of injury" to the respondents received during those altercations; and 4) to make recommendations for further research and for improvement of campus policy toward the reduction of campus violence. I will speak to the role of proximal influences. My colleague, Dr. Reio, with address the influence of distal variables, and will address the combination of proximal and distal influences on the "severity of injury" to the respondents.



Guiding Theory and Research

The current research was guided by two important principles relating to violence. First, it was important to develop, as Archer and Browne(1989) called it, a "natural history" of campus violence in order to understand the contributors to violence in natural settings. A "natural history" refers to a systematic study of "interactions between individuals in settings where aggression is likely to occur" (Archer & Brown, p.17). For this reason, both male and female students were asked to describe their most recent physical altercations in some detail. This approach is distinctly holistic and is similar to that used by criminologists to study homicides (Wilson & Daly, 1985) or violent criminal incidents (Agnew, 1990). A naturalistic description of violent episodes allows for a multivariate examination of influences on the character of that violence and the severity of injury resulting from that episode. Such a naturalistic methodology could easily be adapted to any campus setting and is important as a basis for violence prevention recommendations which are campus sensitive.

A second guiding principle was that it was important that research in natural settings be guided by and inform both laboratory and field research theory. For this purpose, a heuristic model developed by Chermack and Giancola(1997) on the



alcohol-aggression association was utilized. Although their biopsychosocial model was developed almost entirely on laboratory based, bivariate research it organizes many proximal and distal factors, as can be seen in Figure 1.

[Figure 1 about here]

The central features of their biopsychosocial conceptualization, particular within the central and right hand thirds of Figure 1, were that it addresses distal influences, those such as patterns of alcohol use, aggressive disposition, and other personality influences. The model also incorporates proximal influences (i.e., those immediately before or during the altercation) such as, for example, mood, acute alcohol effects, provocation, setting, and relationship types. Perhaps most distinctive about their model is inclusion of a component related to escalatory processes within context. For example, the immediate impact of violence or the opponent's reactions might serve to alter the individual's psychological processes. This is a model in which the "violence severity" is a result of alcohol, psychological, and contextual influences but also, in addition, reciprocally feeds back into those three elements and alters them as the fight develops.



Related Research and Justification

The need for research into violence specifically between college students requires some justification of its own. While I doubt that there are any here who would maintain that college life is an "oasis of placidity", or that youth violence stops suddenly in high school or at the threshold to campus, or that violence on campus is due entirely to predators from surrounding communities, it takes some investigative work to understand the true extent of campus violence.

To what extent is violence a problem on US college campuses? To address this question I have looked both at FBI Uniform Crime Report data and studies using self report data from students. The FBI Uniform Crime Report data for 5 land grant institutions of about 35,000 students, re-calculated per 1,000 students for 1998, showed violent crime prevalence rates such as the following: .6 for the University of Maryland; .7 for Michigan State University; .7 for Ohio State University; .8 for UCLA; and 1 for Arizona State University. These rates are not particularly alarming. However, FBI UCR data have been criticized in many ways, such as the following: 1) they under-estimate crime because of the reluctance of students to report it, incomplete submissions by universities, and varying inclusion criteria (Pezza, 1995; Pezza & Belotti, 1995); 2) only 4 violent crimes are reported-



murder, forcible rape, robbery, and aggravated assault, leaving out simple assault, which is attack on someone for purposes of inflicting bodily injury; and 3) no student injury data is provided in such reports.

Research utilizing self report data clearly show much more cause for concern. For comparison purposes, the Centers for Disease Control (2000) have recently released 1999 data from their research on 15,349 high school students showing: 1) 44% of males and 27.3% of females had been in one or more physical fights in the last 12 months; and 2) 5.3% of males and 2.8% of females had suffered injuries from those fights that required medical attention. Research from college campuses vary on definition of violence. The CORE study (Presley, Leichliter, & Meilman, 1998), based on a sample of 93,679 college students, revealed that 7% of students had experience physical violence or theft involving the use of force in the years 1995, 1996, and 1997. Research by Nicholson, et al. (1998) at Penn State University, found that violent altercations, defined broadly as "slapping, pushing, or other physical force", was reported by 54.9 % of males (with other males) and 14.9% of females with other females in 1996, and that rates had significantly increased from 1994 to 1996.

Therefore, the self reported college campus violence rates, depending on definition and sampling, ranged from a minimum of 70 times to 540 times the rate



per 1,000 of the FBI UCR data, and are more consistent with the CDC rates for high school students.

Method

The current research involves 385 undergraduates, 200 males and 185 women. The participants were asked the following: 1) about the frequency of their verbal arguments and physical altercations in the previous 6 months; and 2) to describe their most recent physical fight with another individual. There were 19 questions about their most recent physical altercations. The questions were a refined set of questions based on any earlier pilot study of 120 male undergraduates. The questions assessed the following: 1) the gender and perceived age and ethnicity of their opponent; 2) their own personality and behavior characteristics before and during the fight (e.g., frequency of fighting, frequency of arguing, mood before the fight, and alcohol use); 3) characteristics of the situation (e.g., reason for the fight, where the fight took place, role of the bystanders, relationship with their opponent); 4) characteristics of the fight itself (e.g., duration, severity of injury to self, severity of injury to opponent); and 5) what happened afterwards and what could have prevented the fight. Previous research which showed greater involvement by males



in fighting suggested that analysis of data needed to be by gender.

Results

The results showed that 32.7% of males and 17.3% of females had at least one physical fight in the previous 6 months. Males had a significantly greater number of physical fights in the last 6 months than did females (ChiSq=12.3, p<.01). I should note that the frequency of fighting in the current study is somewhat higher than that reported CDC high school research and roughly comparable to the self report fighting rates at Penn State University(Nicholson, et al., 1998).

Sixty three percent of the participants (n=241) (74% of the males and 50% of the females) were able to recall and describe a "most recent physical fight".

Slightly over 9% of these respondents said they suffered injury requiring medical attention.

[Figure 2 about here]

Gender differences in frequency of fighting over the last 6 months are shown in Figure 2. Males were more involved in fighting over a six month period, again suggesting that analysis needed to be done by gender.

Analysis showed that students had fought with others like them or perceived to be like them in age (PHI=.41, p < .001), and ethnicity (PHI=.77, p < .001).



[Figure 3 about here]

Figure 3 shows that males generally fought with males and females with females (PHI=.64, p < .001).

To save time, I will simply say that there were a number of proximal influences that were similar for both males and females. For both males and females: 1) the fight was perceived to have been started by the opponent; 2) they suffered about the same amount of injury; 3) there were no legal or retaliatory consequences; 4) alcohol was involved in about 40% of fights; 5) they experienced negative moods before the fight; 6) the fights lasted about 1 to 3 minutes; 7) and the fight could have been prevented by stepping away from it (note: all chi square p<.001).

There were a number of interesting and significant differences in situational effects by gender that I would like to present.

[Figure 4 about here]

Figure 4 shows that males were more likely than females to have fought with a stranger, whereas females fought equally with others of varying relationship to them.

[Figure 5 about here]



Figure 5 shows that males were more likely to have fought in the presence of their friends, whereas females fought in the presence of others of varying relationship to them.

[Figure 6 about here]

Figure 6 shows that males were likely to have fought at a bar or on campus, females in the privacy of their own homes.

[Figure 7 about here]

Figure 7 shows that males said the fight started for a number of reasons, whereas women fought because of an argument over something or "other" reason.

[Figure 8 about here]

Figure 8 shows that for males the bystanders played a variety of roles, including entering the fight and encouraging it, whereas for females bystanders typically tried to break up the fight.

[Figure 9 about here]

Figure 9 shows that for males the fight was stopped by another person intervening whereas for females the fight was stopped in a variety of ways.

[Figure 10 about here]

Figure 10 shows that males reported greater injury to their opponents than did females.



Finally, the continuous, proximal variables were entered into a multiple regression equation predicting to the "severity of injury" to the respondent. Table 1 shows these data.

[Table 1 about here]

Table 1 shows significant contribution to injury to the respondent by the following: negative mood before the fight; severity of the opponent's injury; and whether the respondent had an argument that had turned physical.

Discussion

The current findings can be summarized as follows: 1) physical fighting on campus is far from a rare event on campus and involves about a third of males and 17.3% of females within a 6 month period in 1998; this data shows prevalence rates above those indicated by the CDC in high schools across the country and comparable to other large, land grant institutions such as Penn State University; 2) 9.1% of students suffered injuries from a recent physical altercation which required medical attention, again a rate of injury above that indicated by CDC for high school students; 3) alcohol consumption was present in 40% of violent episodes, and 17% of fighting was cross-gender, suggesting a much greater universe of fighting than extant research would suggest.

[Figure 11 about her]



The *proximal* risks for fighting or being injured in a fight can best be summarized as I have done in Figure 11. Without commenting on all the risks, the risk for males appears to be greater, for example, in public rather than private situations, in response to strangers, in front of friends who play a variety of roles, and when they are experiencing a "bad mood".

Based on the individual proximal risk factors, by gender, as well as the distal risk factors to be presented by Dr. Reio, it should be possible to construct a list of risks for violence and then a set of recommendations for risk reduction. Hammig and Moranetz(2000) recently have done this for risk reduction regarding a broader set of violence situations and a set of behaviors, beliefs and knowledge which served to lower risk and promote safety. For males, specifically, the current research suggests that stepping away from confrontation with strangers in front of friends, particularly those perceived a similar to themselves, would constitute a strategy likely to lower risk of harm. Students could be educated to know the risks and risk prevention strategies.

Finally, the seriousness of the threat to students safety, often an unspoken risk related to college life, is great enough to justify constructing a task force to examine and construct policies designed to reduce violence on campus. The University of Maryland has constructed clear policies and consequences for



academic dishonesty, but not for violent behavior. Such policies constructed could be un- ambiguous, more consistently applied, and triaged by police and dorm supervisors or health officials so as to provide help for students. If punishments were clear and mandated and the consequences no longer allowed for grace, or acceptance of fighting, for example, because the individuals were intoxicated, the campus climate might approach the safety many perceive to be present already.



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Figure 1. Chermack and Giancola's (1997) Biopsychosocial Conceptualization of the Alcohol-Aggression Relationship

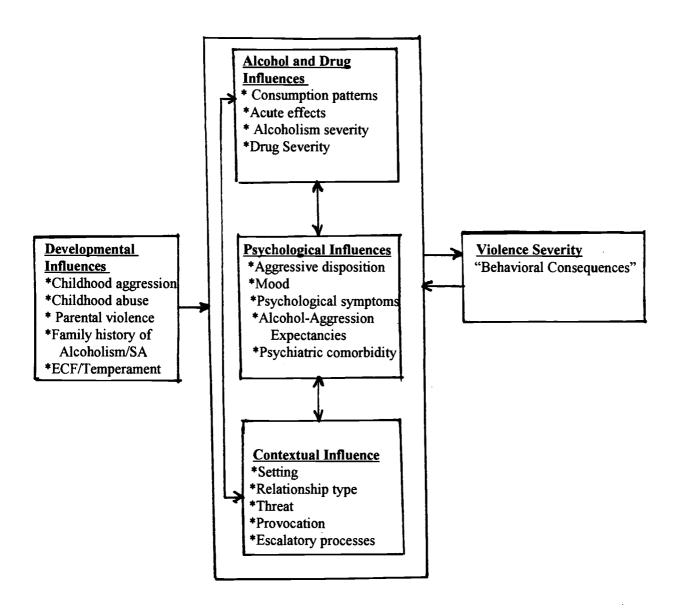
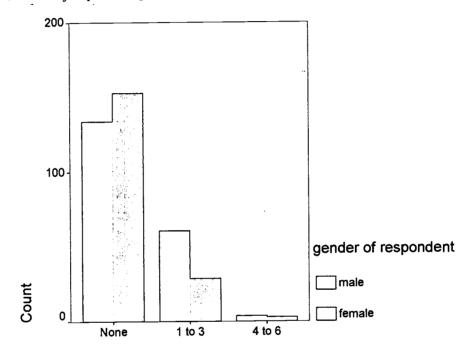




Figure 2 Number of Physical Fights (6 months) by Gender of Respondent

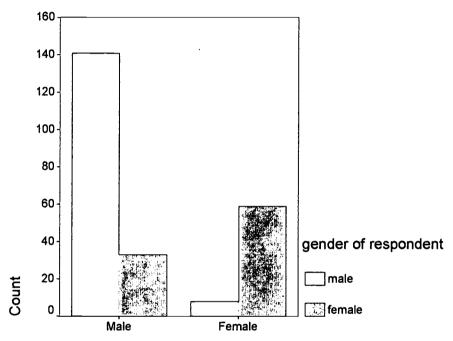


Number of Physical Fights

Chi Sq= 12.3, p<.01



Figure 3
Gender of Opponent by Gender of Respondent

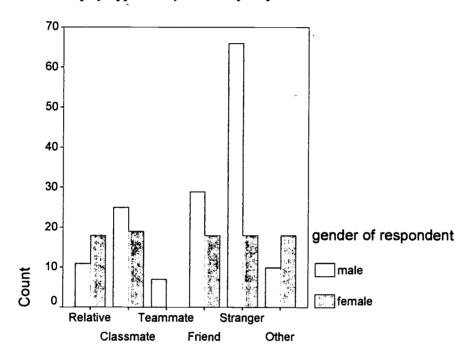


Gender of Opponent

Chi Sq= 97.8, p<.001



Figure 4
Relationship of Opponent by Gender of Respondent



Relationship of Opponent

Chi Sq= 30.6, p<.001



Figure 5
Who Else Was At The Fight by Gender of Respondent

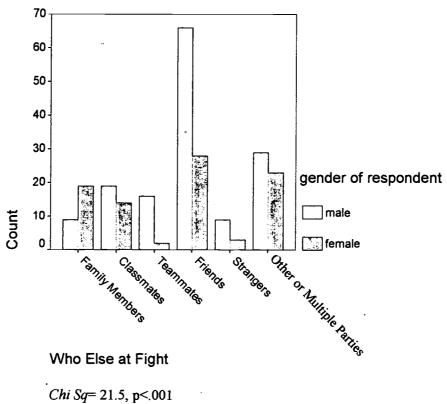
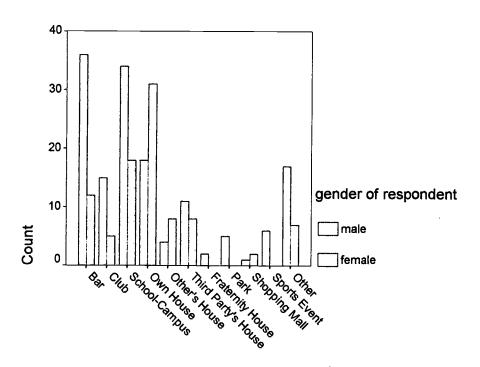




Figure 6
Where the Fight Took Place by Gender of Respondent

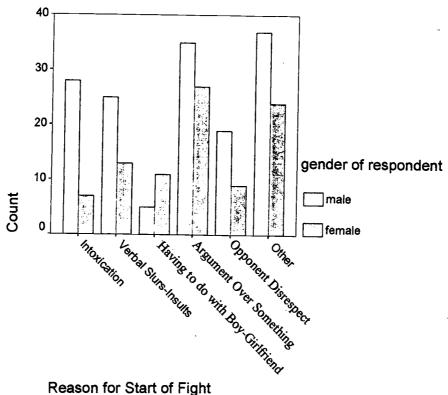


Where Fight Took Place

Chi Sq= 32.7, p<.001



Figure 7 Reason for the Start of the Fight by Gender of Respondent

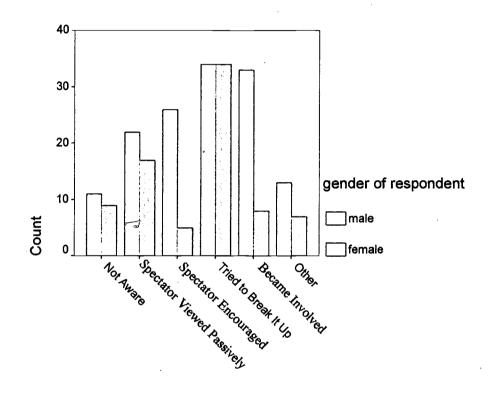


Reason for Start of Fight

Chi Sq= 12.6, p<.05



Figure 8
Role Others Played in the Fight by Gender of the Respondent

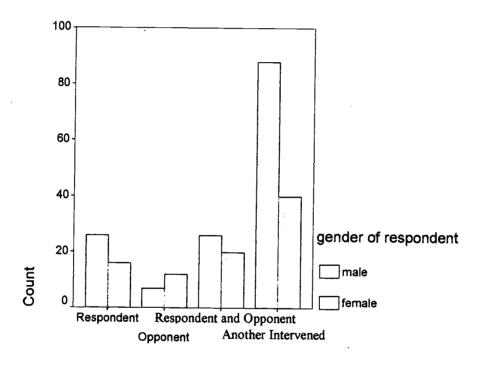


Role Other Played in Fight

Chi Sq= 17.3, p<.01



Figure 9
Who Stopped the Fight by Gender of the Respondent

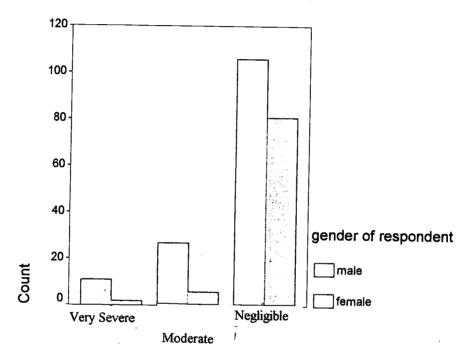


Who Stopped the Fight

Chi Sq= 8.4, p<.05



Figure 10
Severity of Other's Injuries by Gender of the Respondent



Severity of Other's Injuries

Chi Sq= 10.4, p<.01



Table 1
Multiple Regression of Six Proximal Variables Predicting to Severity of Injury to the Respondent

Variable	Beta	t	Sig. of Beta	R	F	Sig. of F
Gender of Respondent	.03	.33	ns			
Gender of Opponent	.00	.03	ns			
Mood Before Fight	.23	2.86	<.01			
Severity of Other's Injury	.16	1.95	<.05			
Ouration of Fight	05	64	ns			
Argument Turned Physical	.17	2.17	<.06			
				.39	3.80	<.01



Figure 11.
Contrast of Proximal Risk Factors for Fighting and Injury for Males and Females

Setting	Males	<u>Females</u>
1. Who?	Other males Strangers Similar Age & Ethnicity	Other females Varying Relationships Similar Age & Ethnicity
2. Who Present?	Friends	Family, Friends, Other
3. Where?	Bar or Campus	Own Home
4. Reason?	Variety of Reasons (argument,slurs,intox.)	Argument over "something"
5. Role of Bystanders?	Variety of Roles (join in, break up, viewed passively)	Tried to Break It Up
6. How Stopped?	Intervention by Third Party	Variety of Ways (Talking, third party)
7. Later Consequences? (E.g., legal, police)	None	None
8. Psychological State?	Bad Mood Lost Control of Argument	Bad Mood Lost Control of Argument
9. Effect on Opponent?	Severe Injury	Severe Injury





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